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APPLICANTS

Thomas M. Schaub, Antibes, FRANCE;
 Andreas Schaefer, Mougins, FRANCE;
 Horst Schnoerer, Angelbachtal, GERMANY;

** CONTINUING DATA ***** None CAS

** FOREIGN APPLICATIONS ***** None CAS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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|--|----------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY FRANCE | SHEETS DRAWING 3 | TOTAL CLAIMS 21 | INDEPENDENT CLAIMS 5 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged <u>Cassidy Lee</u> Examiner's Signature | <u>CAS</u> Initials | | | |

ADDRESS

23838

TITLE

Enterprise management application providing availability control checks on revenue budgets

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| FILING FEE RECEIVED 960 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
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